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DECLARATION

☒ Declaration
Submitted
With Initial Filing

OR ☐ Declaration
Submitted after
Initial Filing

Attorney Docket
Number

12264/018

First Named
Inventor

Dongmao Zhang, et al.

COMPLETE IF KNOWN

Application
Number

Filing Date

Group Art Unit

Examiner Name

As below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PROCESS AND APPARATUS FOR SEGREGATION AND TESTING BY SPECTRAL ANALYSIS OF SOLID DEPOSITS DERIVED FROM LIQUID MIXTURES

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number

and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56

I hereby claim foreign priority benefits under Title 35, United States Code § 19(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
60/462,083	April 11, 2003	
60/462,472	April 11, 2003	
60/490,057	July 25, 2003	
60/551,311	March 8, 2004	
60/554,701	March 19, 2004	

DECLARATION

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I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority sheet attached hereto.

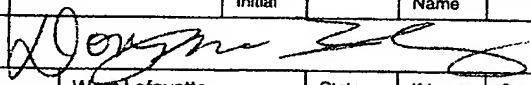
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name	Payor Number (if applicable)	27879	
Brinks Hofer Gilson & Lione			
Name	Registration Number	Name	Registration Number
A. James Richardson	26,983		
Lawrence A. Steward	32,309		
David H. Badger	22,597		
Sanders N. Hillis	45,712		
Dewayne A. Hughes	46,783		

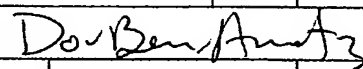
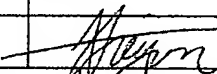
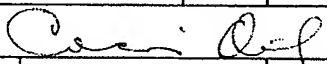
☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

<input checked="" type="checkbox"/> Please direct all correspondence to:	Name	A. James Richardson		
Address BRINKS HOFER GILSON & LIONE				
Address One Indiana Square, Suite 1600				
City	Indianapolis	State	Indiana	ZIP
Country	U.S.A.	Telephone	317-636-0886	Fax
				317-634-6701

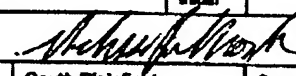
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name	Dongmao	Middle Initial	Family Name	ZHANG
Inventor's Signature				Date
RESIDENCE: City	West Lafayette	State	IN	Country
			US	Citizenship
				P.R. China
POST OFFICE ADDRESS		2901 Manchester Street		
City	West Lafayette	State	IN	ZIP
			47906	Country
			US	Applicant Authority

☒ Additional inventors are being named on supplemental sheet(s) attached hereto.

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name	Dor	Middle Initial		Family Name	BEN-AMOTZ			Suffix			
Inventor's Signature					Date	4-7-04					
RESIDENCE: City	West Lafayette	State	IN	Country	US			Citizenship	US		
POST OFFICE ADDRESS		3275 West 450 North									
City	West Lafayette	State	IN	ZIP	47906	Country	US		Applicant Authority		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name	Yong	Middle Initial		Family Name	XIE			Suffix			
Inventor's Signature					Date	04/07/04					
RESIDENCE: City	West Lafayette	State	IN	Country	US			Citizenship	P.R. China		
POST OFFICE ADDRESS		147 Arnold Drive, Apt. 13									
City	West Lafayette	State	IN	ZIP	47906	Country	US		Applicant Authority		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name	Vincent	Middle Initial	J.	Family Name	DAVISSON			Suffix			
Inventor's Signature					Date						
RESIDENCE: City	West Lafayette	State	IN	Country	US			Citizenship	US		
POST OFFICE ADDRESS		434 Littleton Street									
City	West Lafayette	State	IN	ZIP	47906	Country	US		Applicant Authority		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name	Melissa	Middle Initial		Family Name	MROZEK			Suffix			
Inventor's Signature					Date						
RESIDENCE: City	Lafayette	State	IN	Country	US			Citizenship	US		
POST OFFICE ADDRESS		300-C Ravenwood Lane									
City	Lafayette	State	IN	ZIP	47909	Country	US		Applicant Authority		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name	Corasi	Middle Initial		Family Name	ORTIZ			Suffix			
Inventor's Signature					Date	04/07/04					
RESIDENCE: City	West Lafayette	State	IN	Country	US			Citizenship	US		
POST OFFICE ADDRESS		3422 Cheswick Court, Apt. D4									
City	West Lafayette	State	IN	ZIP	47906	Country	US		Applicant Authority		
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Given Name	Dor	Middle Initial		Family Name	BEN-AMOTZ					Suffix				
Inventor's Signature									Date					
RESIDENCE: City		West Lafayette		State	IN	Country		US		Citizenship	US			
POST OFFICE ADDRESS		3275 West 450 North												
City	West Lafayette	State	IN	ZIP	47906	Country		US		Applicant Authority				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.									
Given Name	Yong	Middle Initial		Family Name	XIE					Suffix				
Inventor's Signature									Date					
RESIDENCE: City		West Lafayette		State	IN	Country		US		Citizenship	P.R. China			
POST OFFICE ADDRESS		147 Arnold Drive, Apt. 13												
City	West Lafayette	State	IN	ZIP	47906	Country		US		Applicant Authority				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.									
Given Name	Vincent	Middle Initial	J.	Family Name	DAVISSON					Suffix				
Inventor's Signature	<i>Vincent J. Davison</i>								Date	4/7/04				
RESIDENCE: City		West Lafayette		State	IN	Country		US		Citizenship	US			
POST OFFICE ADDRESS		434 Littleton Street												
City	West Lafayette	State	IN	ZIP	47906	Country		US		Applicant Authority				
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Given Name	Melissa	Middle Initial		Family Name	MROZEK					Suffix				
Inventor's Signature									Date					
RESIDENCE: City		Lafayette		State	IN	Country		US		Citizenship	US			
POST OFFICE ADDRESS		300-C Ravenwood Lane												
City	Lafayette	State	IN	ZIP	47909	Country		US		Applicant Authority				
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Given Name	Corasi	Middle Initial		Family Name	ORTIZ					Suffix				
Inventor's Signature									Date					
RESIDENCE: City		West Lafayette		State	IN	Country		US		Citizenship	US			
POST OFFICE ADDRESS		3422 Cheswick Court, Apt. D4												
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Inventor's Signature								Date			
RESIDENCE: City		West Lafayette		State	IN	Country		US			
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City	West Lafayette	State	IN	ZIP	47906		Country		US		
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Given Name	Vincent	Middle Initial	J.	Family Name	DAVISSON			Suffix			
Inventor's Signature								Date			
RESIDENCE: City		West Lafayette		State	IN	Country		US			
POST OFFICE ADDRESS		434 Littleton Street									
City	West Lafayette	State	IN	ZIP	47906		Country		US		
							Applicant Authority				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name	Melissa	Middle Initial		Family Name	MROZEK			Suffix			
Inventor's Signature								Date	07 APR 2004		
RESIDENCE: City		South Plainfield		State	NJ	Country		US			
POST OFFICE ADDRESS		932 Klesam Court									
City	South Plainfield	State	NJ	ZIP	07080		Country		US		
							Applicant Authority				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name	Corael	Middle Initial		Family Name	ORTIZ			Suffix			
Inventor's Signature								Date			
RESIDENCE: City		West Lafayette		State	IN	Country		US			
POST OFFICE ADDRESS		3422 Cheswick Court, Apt. D4									
City	West Lafayette	State	IN	ZIP	47906		Country		US		
							Applicant Authority				
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